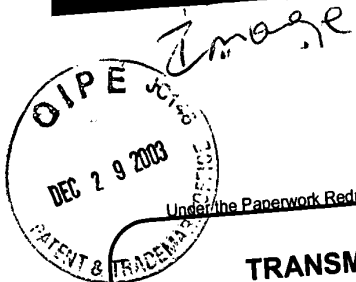


1761



PTO/SB/21 (08-03)  
Approved for use through 08/30/2003. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/082,065
	Filing Date	FEB. 26, 2002
	First Named Inventor	BASOK, B.
	Art Unit	1761
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	PUL01

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	DANIEL M. KENNEDY REG. NO. 32,144
Signature	<i>Daniel M. Kennedy</i>
Date	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	DANIEL M. KENNEDY	Date
Signature	<i>Daniel M. Kennedy</i>	12/23/03

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

I hereby certify that this correspondence will be deposited with the United States Postal Service as First Class Mail on 12/23/03 in an envelope addressed to the Assistant Commissioner for Patents, Washington, DC, 20231, by DANIEL M. KENNEDY, Reg. No. 32,144.  
Signature *Daniel M. Kennedy*



PUL01

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of : Basok B., et al

Serial No : 10/082,065 :

Filed : Feb. 26, 2002

For : Pulse Energy Transformation

Group Art Unit : 1761

Examiner : .

Rockville, MD 20850

Honorable Assistant Commissioner for Patents

Washington, D.C. 20231

Dear Sir

**Revocation and New Power Of Attorney Under 37 CFR 1.36**

Six fully executed **PTO/SB/82 forms** are enclosed for the Revocation of the Power Of Attorney of the originally empowered patent practitioner in the captioned patent application with new Power of Attorney and Change of Address included to appoint the undersigned patent practitioner, Daniel M. Kennedy, as Agent-of-Record for the application.

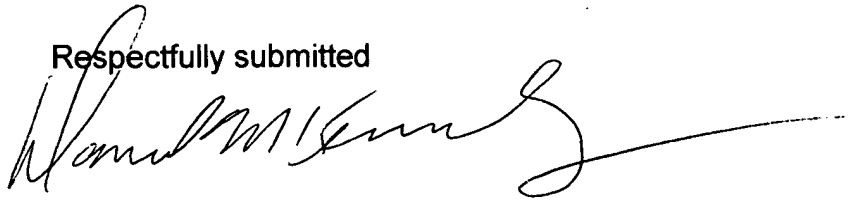
The patent application names six co-inventors - two resident U.S. citizens and four non-US residents who are citizens of and reside in Ukraine (UA). All inventors are required to sign a PTO/IS/82 form. Two of Forms PTO/IS/82 are signed respectively by the U.S. co-inventors, William Begell and Yelena Shafeyeva. The

four PTO/SB/82 forms for co-inventors Basok, Boris; Dolinsky, Anatoliy; Ivanitsky, Georgiy K.; and Shurchkova, Yulia; all of Ukraine have been signed by co-inventor Yelena Shafeyeva (see MPEP 402.01) as empowered by a Power of Attorney awarded and executed on September 2, 2002 in Kiev, Ukraine by the Ukrainian co-inventors.

A Notarized copy of the Power of Attorney assigned to Yelena Shafeyeva is included herein in the Ukraine language as well as a copy of a Certified translation of the Ukraine POA into the English language. Ukraine Notaries cannot notarize English language copy; hence the English translation does not include a Ukraine Notary stamp.

It is respectfully requested that the assignment of the POA for the new Agent-of-Record be entered on the date when received by the USPTO (per MPEP 402.05), and further USPTO communications be directed to the office address, e-mail address or telephone numbers indicated below.

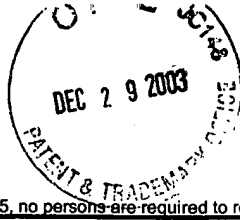
Respectfully submitted

A handwritten signature in black ink, appearing to read "Daniel M. Kennedy", with a long horizontal flourish extending to the right.

Daniel M. Kennedy

USPTO Reg. Number 32,144

10105 Burton Glen Drive  
Rockville, MD 20850  
301-762-2282 (O)  
301-762-2025 (fax)  
dan10105@earthlink.net



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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/082,065
Filing Date	FEB. 26 2002
First Named Inventor	BORIS BASOK
Art Unit	
Examiner Name	
Attorney Docket Number	

**I hereby revoke all previous powers of attorney given in the above-identified application.**☒ A Power of Attorney is submitted herewith.**OR**☐ I hereby appoint the practitioners associated with the Customer Number:☒ Please change the correspondence address for the above-identified application to:☐ The address associated with  
Customer Number:**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	DANIEL M. KENNEDY      REGISTRATION NUMBER 32,144				
Address	10105 BURTON GLEN DRIVE				
Address					
City	ROCKVILLE,	State	MD	Zip	20850
Country	USA				
Telephone	301-762-2282	Fax	301-762-2025		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

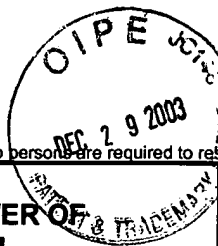
Name	WILLIAM BEGELL		
Signature			
Date	12/16/03	Telephone	212-725-1999

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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PTO/SB/82 (09-03)

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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/082,065
Filing Date	FEB. 26 2002
First Named Inventor	BORIS BASOK
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

--

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with  
Customer Number:

--

OR

<input checked="" type="checkbox"/> Firm or Individual Name	DANIEL M. KENNEDY	REGISTRATION NUMBER 32,144
Address	10105 BURTON GLEN DRIVE	
Address		
City	ROCKVILLE,	State MD Zip 20850
Country	USA	
Telephone	301-762-2282	Fax 301-762-2025

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

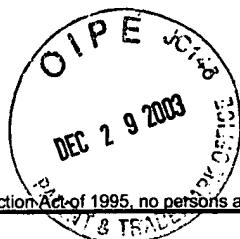
Name	YELENA SHAFEYEVA		
Signature			
Date	December 16, 2003	Telephone	212-725-1999

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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AND  
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Application Number	10/082,065
Filing Date	FEB. 26, 2002
First Named Inventor	BORIS BASOK
Art Unit	
Examiner Name	
Attorney Docket Number	

**I hereby revoke all previous powers of attorney given in the above-identified application.**☒ A Power of Attorney is submitted herewith.**OR**☐ I hereby appoint the practitioners associated with the Customer Number:☒ Please change the correspondence address for the above-identified application to:☐ The address associated with  
Customer Number:**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	DANIEL M. KENNEDY REGISTRATION NUMBER 32,144				
Address	10105 BURTON GLEN DRIVE				
Address					
City	ROCKVILLE	State	MD	Zip	20850
Country	USA				
Telephone	301-762-2282	Fax	301-762-2025		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

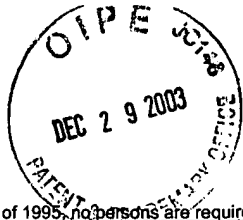
Name	A. A. DOLINSKY		
Signature	<i>A. Dolinsky per (POA 9/02/02) U.S.</i>		
Date	December 16 2003	Telephone	202-7257999

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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Application Number	10/082,065
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First Named Inventor	BORIS BASOK
Art Unit	
Examiner Name	
Attorney Docket Number	

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OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with  
Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	DANIEL M. KENNEDY REGISTRATION NUMBER 32,144				
Address	10105 BURTON GLEN DRIVE				
Address					
City	ROCKVILLE	State	MD	Zip	20850
Country	USA				
Telephone	301-762-2282	Fax	301-762-2025		

I am the:

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

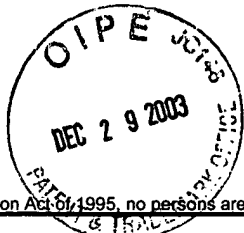
Name	B. IV. BASOK		
Signature	B. IV. BASOK (per POA 09/02/02) - VS		
Date	December 16, 2003	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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Application Number	10/082,065
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First Named Inventor	BORIS BASOK
Art Unit	
Examiner Name	
Attorney Docket Number	

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<input checked="" type="checkbox"/> Firm or Individual Name	DANIEL M. KENNEDY REGISTRATION NUMBER 32,144				
Address	10105 BURTON GLEN DRIVE				
Address					
City	ROCKVILLE	State	MD	Zip	20850
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Telephone	301-762-2282	Fax	301-762-2025		

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Y. A. SHURCHKVA		
Signature	<i>Y. Shurchkova (per POA 9/02/02)</i>		
Date	December 16, 2003	Telephone	202-8251999

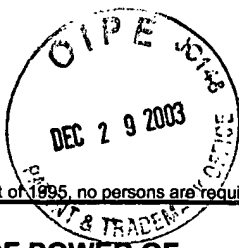
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**REVOCATION OF POWER OF  
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AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/082,065
Filing Date	FEB. 26, 2002
First Named Inventor	BORIS BASOK
Art Unit	
Examiner Name	
Attorney Docket Number	

**I hereby revoke all previous powers of attorney given in the above-identified application.**☒ A Power of Attorney is submitted herewith.**OR**☐ I hereby appoint the practitioners associated with the Customer Number: ☒ Please change the correspondence address for the above-identified application to:☐ The address associated with  
Customer Number: **OR**

<input checked="" type="checkbox"/> Firm or Individual Name	DANIEL M. KENNEDY REGISTRATION NUMBER 32,144				
Address	10105 BURTON GLEN DRIVE				
Address					
City	ROCKVILLE	State	MD	Zip	20850
Country	USA				
Telephone	301-762-2282	Fax	301-762-2025		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	G.K. IVANITSKY				
Signature	<i>G. Ivanitsky (per POA 9/02/02) YS</i>				
Date	December 16, 2003	Telephone	212-7257999		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



## CERTIFICATION

Schreiber Translations, Inc.

51 Monroe Street

Suite 101

Rockville, MD 20850

P: 301.424.7737

F: 301.424.2336

This is to certify that the attached English language document, identified as Ukraine, Power of Attorney, BAA #462741, is a true and accurate translation of the original Ukrainian language document to the best of our knowledge and belief.

Executed this 5<sup>th</sup> day  
of December, 2003

Director of Translation Services  
Schreiber Translations, Inc.  
51 Monroe Street, Suite 101  
Rockville, Maryland 20850  
ATA Member 212207

Schreiber Translations, Inc. uses all available measures to ensure the accuracy of each translation, but shall not be held liable for damages due to error or negligence in translation or transcription.

UKRAINE

POWER OF ATTORNEY

In the City of Kyiv (Kiev) on the second day of September, the year two thousand two.

We,

**Mr. ANATOLIY ANDRIYOVYCH DOLINSKYI**

permanently residing at 20 Tarasivska St., Apt. 26, Kyiv (Kiev),

**Mr. BORIS IVANOVYCH BASOK**

permanently residing at 21 Uborevycha St., Apt. 26, Kyiv (Kiev),

**Ms. YULIYA OLEKSANDRIVNA SHURCHKOVA**

permanently residing at 88 Saksaganskogo St., Apt. 52, Kyiv (Kiev), Ukraine,

and

**Mr. GEORGIY KOSTYANTYNOVYCH IVANYTSKYI**

permanently residing at 13 Nauki Avenue, Apt. 50, Kyiv (Kiev),

hereby appoint

**Ms. OLENA MANSURIVNA SHAFEYEVA**, citizen of the United States of America,

Executive Director with Pulse™ LLC, a company whose headquarters are located at

145 Madison Ave., Suite 6 North, New York, NY 10016, USA,

to represent our interests as the co-inventors in all the US agencies on all issues related to the reviewing of our pending US Joint Patent Application No. 10/082, 065, which was filed on February 26, 2002 under the title "PULSE ENERGY TRANSFORMATION™", and obtaining the Patent; and also on all matters related to our Application for Patent Cooperation Treaty No. PCT/USO 2/05516 filed under the above referenced title on February 26, 2002, and obtaining the Patent.

For the purpose of proper representation of our interests, we hereby authorize Ms. Olena M. Shafeyeva to act on our behalf on all issues related to the filing and obtaining of relevant documents, petitions and applications; to sign documents on our behalf and perform all other legal actions pertaining to the reviewing of our Patent Applications and obtaining our Patents.

This Power of Attorney has been issued for the period of three years from the date of its signing and is valid until **the second day of September, the year two thousand five.**

[Signature]                      A.A. Dolinskyi

[Signature]                      B. I. Basok

[Signature]                      Yu. O. Shurchkova

[Signature]                      G. K. Ivanytskyi

The City of Kyiv (Kiev), September 02, 2002

I, T. V. Matviyenko, Notary Public of Public Notary Office Seventeen in the City of Kiev, certify the signatures of Mr. ANATOLIY ANDRIYOVYCH DOLINSKYI, permanently residing at 20 Tarasivska St., Apt. 26, Kyiv (Kiev); Mr. BORIS IVANOVYCH BASOK, 21 Uborevycha St., Apt. 26, Kyiv (Kiev); Ms. YULIYA OLEKSANDRIVNA SHURCHKOVA, permanently residing at 88 Saksaganskogo St., Apt. 52, Kyiv (Kiev), and Mr. GEORGIY KOSTYANTYNOVYCH IVANYTSKYI, permanently residing at 13 Nauki Avenue, Apt. 50, Kyiv (Kiev); I have verified the identity of the above referenced, and they are the persons named in this document. The above referenced persons have signed this document before me personally, and they duly confirmed the document's validity.

Registered in the Registration Book, Entry # 1-2039  
State duty paid: 0 hryvnas 34 kopecks

[Signature]  
Notary Public

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**BAA No. 462741**

## ДОРУЧЕННЯ

Місто Київ, другого вересня дві тисячі другого року.  
Ми, **ДОЛІНСЬКИЙ АНАТОЛІЙ АНДРІЙОВИЧ**, який проживає за адресою: м. Київ, вул. Тарасівська, буд. 20, кв. 26,  
**БАСОК БОРИС ІВАНОВИЧ**, який проживає за адресою: м. Київ, вул. Уборевича, буд. 21, кв. 26,  
**ШУРЧКОВА ЮЛІЯ ОЛЕКСАНДРІВНА**, яка проживає за адресою: м. Київ, вул. Саксаганського, буд. 88, кв. 52, та  
**ІВАНИЦЬКИЙ ГЕОРГІЙ КОСТЯНТИНОВИЧ**, який проживає за адресою: м. Київ, пр-т Науки, буд. 13, кв. 50,

цим дорученням уповноважуємо  
гр. США **ШАФЄСВУ ОЛЕНУ МАНСУРІВНУ**, Виконавчого Директора компанії "Pulse™ LLC", головний офіс якої розташований за адресою: 145 Madison Ave. Suite 6 North, New York, NY 10016,

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Підпис: \_\_\_\_\_ (Іваницький Г.К.)

Місто Київ, 02 вересня 2002 року.

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